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Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number CONTINUED PROSECUTION APPLICATION (CPA) ( REQUEST TRANSMITTAL CHECK BOX, if applicable: Submit an original, and a duplicate for fee processing. DUPLICATE (Only for Continuation or Divisional applications under 37 CFR 1.53(d)) Attorney Docket No. SC-5285 of Prior Application Address to: Assistant Commissioner for Patents First Named Inventor STAVNES **Box CPA** Examiner Name Washington, DC 20231 Group Art Unit Express Mail Label No. EE176089853US This is a request for a (continued prosecution application (CPA)) of prior application number 09 / 054 986 TUBE & METHOD entitled FUSE **NOTES** DEC 118 2001 FILING QUALIFICATIONS: The prior application identified above must be a nonprovisional application that is either: (1) complete as defined by 37 CFR 1.51(b), or (2) the national stage of an international application in compliance with 35 U.S.C. 371. Effective May 29, 2000, a CPA may only be filed in a utility or a plant application if the prior nonprovisional application was filed before (fay) 29, 2000. A CPA may be filed in a design application regardless of the filing date of the prior application. See "Request fay" Continued Examination Practice changes to and Provisional Application Practice," Final Rule, 65 Fed. Reg. 50092 (Aug. 16, 2000); Interim Rule, 65 Fed. Reg.14865 (Mar. 20, 2000), 1233 Off. Gaz. Pat. Office (Apr. 11, 2000). C-I-P NOT PERMITTED: A continuation-in-part application cannot be filed as a CPA under 37 CFR 1.53(d), but must be filed under 37 CFR 1.53(b). EXPRESS ABANDONMENT OF PRIOR APPLICATION: The filing of this CPA is a request to expressly abandon the prior application as of the filing date of the request for a CPA. 37 CFR 1.53(b) must be used to file a continuation, divisional, or continuation-in-part of an application that is not to be abandoned. ACCESS TO PRIOR APPLICATION: The filing of this CPA will be construed to include a waiver of confidentiality by the applicant under 35 U.S.C. 122 to the extent that any member of the public who is entitled under the provisions of 37 CFR 1.14 to access to, copies of, or information concerning, the prior application may be given similar access to, copies of, or similar information concerning, the other application or applications in the file jacket. 35 U.S.C. 120 STATEMENT: In a CPA, no reference to the prior application is needed in the first sentence of the specification and none should be submitted. If a sentence referencing the prior application is submitted, it will not be entered. A request for a CPA is the specific reference required by 35 U.S.C. 120 and to every application assigned the application number identified in such request, 37 CFR 1.78(a). WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. Enter the unentered amendment previously filed on under 37 CFR 1.116 in the prior nonprovisional application. A preliminary amendment is enclosed. 3. This application is filed by fewer than all the inventors named in the prior application, 37 CFR 1.53(d)(4). a. DELETE the following inventor(s) named in the prior nonprovisional application: b. The inventor(s) to be deleted are set forth on a separate sheet attached hereto. 4. A new power of attorney or authorization of agent (PTO/SB/81) is enclosed. 12/17/2001 AWDNDAF1 00000117 190225 5. Information Disclosure Statement (IDS) is enclosed: 09054986

[Page 1 of 2]
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|   | work Reduction Act of 1995, no   |                                     |                  |          |                  |  |  |  |  |
|---|--|-------------------------------------|------------------|----------|------------------|--|--|--|--|
| CLAIMS  | (1) FOR  | (2) NUMBER FILED                    | (3) NUMBER EXTRA | (4) RATE | (5) CALCULATIONS |  |  |  |  |
|   | OTAL CLAIMS<br>37 CFR 1.16(c) or (j))  | <i>-</i> 20* =                      |                  | x \$=    | \$               |  |  |  |  |
|   | NDEPENDENT CLAIMS<br>37 CFR 1.16(b) or (i))  | 2 -3**=                             |                  | x \$ =   |                  |  |  |  |  |
| N   | MULTIPLE DEPENDENT CLAIMS (if applicable) (37 CFR 1.16(d)) + \$ =                              |                                     |                  |          |                  |  |  |  |  |
|   | BASIC FEE (37 CFR 1.16) 740  |                                     |                  |          |                  |  |  |  |  |
|   | Total of above Calculations =  Reduction by 50% for filing by small entity (Note 37 CFR 1.27). |                                     |                  |          |                  |  |  |  |  |
| R   |  |                                     |                  |          |                  |  |  |  |  |
| •   | Reissue claims in excess o<br>* Reissue independent claim                                      |                                     | tent.            | TOTAL =  | 740.             |  |  |  |  |
| b. Fees required under 37 CFR 1.17. c. Fees required under 37 CFR 1.18.  8. A check in the amount of \$ |  |                                     |                  |          |                  |  |  |  |  |
|   |  | 14. NEW CORRESI                     | PONDENCE ADDRESS | 3        |                  |  |  |  |  |
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| 15. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED   |  |                                     |                  |          |                  |  |  |  |  |
|   |  | Name (Print /Type) JAMES V. LAPACEK |                  |          |                  |  |  |  |  |

Signature

Date

Registration No. (Attorney/Agent)



## CPA PATENT APPLICATION – CERTIFICATE OF MAILING

**INVENTORS:** 

Mark W. Stavnes Jeffrey A. Moore Thomas J. Tobin

TITLE OF INVENTION:

FUSE TUBE AND METHOD OF MANUFACTURE THEREOF

ATTORNEY DOCKET NO.: SC-5285

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ASSISTANT COMMISSIONER FOR PATENTS BOX CPA WASHINGTON, D.C. 20231 DEC 11 2001 300

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| erwork reduction rate or 1000, no persons are required to re |                    |            |
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|  | Application Number | 09/054,986 |
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## TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

| Application Number     | 09/054,986 |  |  |  |
|------------------------|------------|--|--|--|
| Filing Date            | 04/03/1998 |  |  |  |
| First Named Inventor   | STAVNES    |  |  |  |
| Group Art Unit         | 1772       |  |  |  |
| Examiner Name          | S. NOLAN   |  |  |  |
| Attorney Docket Number | SC-5285    |  |  |  |

| Total Number of Pages in This Submission   |                                 |                     | 12                      | Attorney Docket Nu                        | umber                        | SC-5285   |  |
|--|---------------------------------|---------------------|-------------------------|---|------------------------------|---|--|
| ENCLOSURES (check all that apply)  |                                 |                     |                         |   |                              |   |  |
| Fee Transmittal Form   | ו                               |                     | (for an A               | nent Papers<br>Application)               |                              | After Allowance Communication to Group  Appeal Communication to Board |  |
| Fee Attached   |                                 | Drawing(s)          |                         |   | of Appeals and Interferences |   |  |
| Amendment / Reply  |                                 | <u> </u>            | Licensir                | g-related Papers                          |                              | Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)     |  |
| After Final  |                                 | <u> </u>            | Petition                |   | ŀ                            | Proprietary Information   |  |
| Affidavits/declaration(s)  |                                 | L_                  | Provisio                | to Convert to a nal Application           |                              | Status Letter   |  |
| Extension of Time Request  |                                 |                     | Power of Change Address | of Attorney, Revocation of Correspondence | ו                            | Other Enclosure(s) (please identify below):                           |  |
|  | ent Dogwoot                     |                     | Termina                 | l Disclaimer                              |                              | CPA Request (PTO/SB/29)   |  |
| Express Abandonment Request  |                                 | Request for Refund  |                         |   | Cert. of Express Mailing     |   |  |
| Information Disclosure Statement   |                                 | CD, Number of CD(s) |                         |   | Return receipt postcard      |   |  |
| Certified Copy of Priority Document(s)   |                                 | Remarks             |                         | •   | RECEIVED                     |   |  |
| Response to Missing Incomplete Application   |                                 |                     |                         | •   |                              |   |  |
| Response to  | Missing Parts<br>R 1.52 or 1.53 |                     |                         |   |                              | DEC 1 8 2001  |  |
| under 57 Of 1  |                                 |                     |                         |   |                              | TO 1700   |  |
|  | SIGNATU                         | JRE C               | F APPL                  | CANT, ATTORNEY                            | , OR <i>I</i>                | AGENT   |  |
| Firm or S&C ELECTRIC CO., James V. Lapacek   |                                 |                     |                         |   |                              |   |  |
| Signature Jam Vol  |                                 |                     |                         |   |                              |   |  |
| Date   | 12/10/2001                      |                     |                         |   |                              |   |  |
| CERTIFICATE OF MAILING   |                                 |                     |                         |   |                              |   |  |
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| Typed or printed name  |                                 |                     |                         |   |                              |   |  |
| Signature  |                                 |                     |                         |   | Date                         |   |  |

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